Heartland Revolution PO Box 940 Union, KY 41091

Re: Form 1, Statement of Organization-Unlimited Contributions

To Whom It May Concern:

This committee is being formed to nake independent expenditures in accordance with the U.S. Court of Appeals for the District o Columbia Circuit decision in SpeechNow v. FEC, thus intending to raise funds in unlimite 1 amounts. In accordance with this ruling, the committee will not utilize these funds in any fashing to coordinate communications to any federal candidates or committees.

Sincerely

Janie Waltz Treasurer

FEC FORM 1		MENT OF NIZATION	Office Usa Only			
1. NAME OF COMMITTEE (in full)	(Check if is change		12FE4M5			
Heartland Revo	plution					
	PC Box		<u> </u>			
ADDRESS (number and street)			<u></u>			
(Check if address is changed)	Union		KY 41091			
		CITY	STATE ZIP CODE			
COMMITTEE'S E-MAIL ADDRES	ss (Please provide	nly one e-mail address) 276@gmail.com,				
(Check if address is changed)						
COMMITTEE'S WEB PAGE AD:	Dress (URL)					
(Check if address						
is changed)						
2. DATE 12 16 2010						
3. FEC IDENTIFICATION NI.	IMBER	C				
4. IS THIS STATEMENT	NEW (N)	OR AMENDED (A)				
I certify that I have examined this	is State nent and t	the best of my knowledge and belief it is	s true, correct and complete.			
Type or Print Name of Treasurer	Janie V	'altz				
Signature of Treasurer	66		Date 12 16 2010			
	•	ormation may subject the person signing this ORMATION SHOULD BE REPORTED WIT	s Statement to the penalties of 2 U.S.C. §437g. HIN 10 DAYS.			
Office Use Only		For further information con Federal Election Commission Tell Free 800-424-9530 Local 202-894-1100				

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_	F	EC For	m 1 (Reviser) 02/2009)	Page 2	
5.	Candidate Committee:		· =		
			Committee:		
	(a)	Ш	This committee is a principal c	npaign committee. (Complete the candidate information below.)	
	(b) This committee is an authorize information below.)			committee, and is NOT a principal campaign committee. (Complete the candida	ite
	Name of Candidate			 	
	Candl Party	date Affiliatio	Offic n Sou		and the control of th
	(c)		This committee supports/oppos	s only one candidate, and is NOT an authorized committee.	
	Name of Candidate				
	Party	y Com	mittee:		
	(d)		This committee is a	(National, State (Democratic, or subordinate) committee of the Republican, etc.)	Party.
	Polit	ical Ad	tion Committee (PAC):		
	(e)		This committee is a separate s	gregated fund. (Identify connected organization on line 6.) Its connected organization	on Is a:
	•	ليا	Corporation	Corporation w/o Capital Stock Labor Organizal	
			F		401.
			Membership Organizati	Trade Association Cooperative	
			In addition, this	mmittee is a Lobbyist/Registrant PAC.	
	(f) This committee supports/oppos is more than one Federal candidate, and is NOT a separate segregated fund committee. (i.e., nonconnected cilimitate)			party	
			In acidition, this committee	is a Lobbyist/Registrent PAC.	
			In ecidition, this committee	is a Leadership PAC. (Identify sponsor on line 6.)	
	Joint	Fundi	aising Representative:		
				I ns., pays fundraising expenses and disburses net proceeds for two or more political one of which is an authorized committee of a federal sendidate.	ı
+	(h) This committee collects contribute ns, pays fundraising expenses and disburses net proceeds for two or more politic committees/crganizations, none which is an authorized committee of a federal candidate.		l		
	Committees Participating in Joint F		nittees Parthaipating in Joint F	Indraiser Indraiser	
		1.		FEC ID number C	
		2.			
		3.			• • • • • • • • • • • • • • • • • • • •
			<u> </u>	The second secon	
		4 .		FEC ID number C	🗴

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FEC Form 1 (Revise : 02/2009)		Paga 3
Write or Type Committee Name		
Heartland Reyolution		
6. Name of Any Connecter Organization, Aff	ated Committee, Joint Fundraising Repre	sentative, or Leadership PAC Sponsor
NONE		
Mailing Address		
		1
	СПУ	STATE ZIP CODE
Relationship: Connected Organization	Affiliated Committee Joint Fundraising F	Representative Leadership PAC Sponsor
Heistionship: Connected Organization	Williared Collituities Doubt condisions a	representativeceatoership FAC apprison
 Custodian of Records: Identify by name, ad- books and records. 	1888 (phone number — optional) and position	n of the person in possession of committee
Janie Waltz		
ruii Name	40	
Malling Address PO Box (40	<u> </u>
لينتنا		
Urijon		KY 41091
Title or Position	CITY	STATE ZIP CODE
T		
Treasurer	Telephone numb	er 859 - 652 - 3712
8. Treasurer: List the name and address (phone any designated agent (e.g., assistant treasure		committee; and the name and address of
Full Name Janie Waltz		
Of Headulai	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	
Mailing Address	10 1	
لينييا		
Union ,		KY 41091
Title or Position	CITY S	TATE ZIP CODE
Treasurer	Telephone numb	er
	•	

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No Postmark				
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